| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2008 | | Docket Number (Optional) 09857/0202181-US0 | |
|---|--------|---|-----------------|
| (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | | |
| Application Number 10/518,159-Conf. # | 7593 | Filed Jan | uary 18, 2005 |
| For USE OF COMPOUNDS HAVING GIP ACTIVITY FOR THE TREATMENT OF DISORDERS ASSOCIATED WITH ABNORMAL LOSS OF CELLS AND/OR FOR THE TREATMENT OF OBESITY | | | |
| Art Unit 1649 | | Examiner D | aniel E. Kolker |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | |
| | Fee | Small Entity Fee | |
| One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ |
| Two months (37 CFR 1.17(a)(2)) | \$460 | \$230 | \$ |
| X Three months (37 CFR 1.17(a)(3)) | \$1050 | \$525 | \$ 1,050.00 |
| Four months (37 CFR 1.17(a)(4)) | \$1640 | \$820 | \$ |
| Five months (37 CFR 1.17(a)(5)) | \$2230 | \$1115 | \$ |
| Applicant claims small entity status. See 37 CFR 1.27. | | | |
| A check in the amount of the fee is enclosed. | | | |
| X Payment by credit card. | | | |
| The Director has already been authorized to charge fees in this application to a Deposit Account. | | | |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-0100 | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | |
| am the applicant/inventor. | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | |
| x attorney or agent of record. Registration Number 60,463 | | | |
| attorney or agent under 37 CFR 1.34. | | | |
| Registration number if acting under 37 CFR 1.34 | | | |
| December 21, 2007 | | | |
| Signature Date | | | |
| Thomas H. Burrows, Jr. | | (212) 527-7623 | |
| Typed or printed name Telephone Number | | | |
| NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| X Total of forms are submit | ited. | | |
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